

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000034845

Entity Name: RIMAWI MEDICAL CONSULTING, PLLC

Current Principal Place of Business:

17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470

Current Mailing Address:

7512 DR. PHILLIPS BLVD.
UNIT 50-657
ORLANDO, FL 32819 US

FEI Number: 46-5071343

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
3458 LAKESHORE DRIVE
TALLAHASSEE, FL 32312 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED MEMBER
Name EL RIMAWI, NIDAL DR.
Address 7512 DR. PHILLIPS BLVD.
 UNIT 50-657
City-State-Zip: ORLANDO FL 32819

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NIDAL EL RIMAWI

OWNER

04/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date